



Practitioner's Docket No. 13743.113US

PATENT

## COMBINED DECLARATION AND POWER OF ATTORNEY

(ORIGINAL, DESIGN, NATIONAL STAGE OF PCT, SUPPLEMENTAL, DIVISIONAL,  
CONTINUATION, OR C-I-P)

As a below named inventor, I hereby declare that:

### TYPE OF DECLARATION

This declaration is for the following type of application:

- ☒ Original
- ☐ Design
- ☐ National Stage of PCT
- ☐ Supplemental
- ☐ Divisional
- ☐ Continuation
- ☐ C-I-P

### INVENTORSHIP IDENTIFICATION

My residence, post office address and citizenship are as stated below, next to my name. I believe that I am the original, first and sole inventor of the subject matter that is claimed, and for which a patent is sought on the invention entitled:

### TITLE OF INVENTION

BLACK HOLE FLIGHT SIMULATOR

### SPECIFICATION IDENTIFICATION

- |                                     |  |
|-------------------------------------|--|
| <input checked="" type="checkbox"/> | The specification is attached hereto.  |
| <input type="checkbox"/>            | The specification was filed on August 4, 2003 as Application No. _____.                                |
| <input type="checkbox"/>            | The specification was described and claimed in PCT International Application No. _____ filed on _____. |

### ACKNOWLEDGMENT OF REVIEW OF PAPERS AND DUTY OF CANDOR

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose information, which is material to patentability as defined in 37, Code of Federal Regulations, Section 1.56.

(Declaration and Power of Attorney--page 1 of 2)

## POWER OF ATTORNEY

I hereby appoint the practitioners associated with the Customer Number provided below to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith:

**CUSTOMER NO. 24283**

---

**SEND CORRESPONDENCE TO:**  
**CUSTOMER NO. 24283**

**DIRECT TELEPHONE CALLS TO:**  
Name: Carl A. Forest  
Phone: 303-894-6114

---

## DECLARATION

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

## SIGNATURE(S)

Andrew J.S. Hamilton  
Inventor's signature



Date **02 Sep 2003**

Country of Citizenship Britain

Residence Boulder, Colorado

Post Office Address 3500 19<sup>th</sup> Street, Boulder, CO 80304

**COMBINED DECLARATION AND POWER OF ATTORNEY****(ORIGINAL, DESIGN, NATIONAL STAGE OF PCT, SUPPLEMENTAL, DIVISIONAL,  
CONTINUATION, OR C-I-P)**

As a below named inventor, I hereby declare that:

**TYPE OF DECLARATION**

This declaration is for the following type of application:

- ☒ Original  
☐ Design  
☐ National Stage of PCT  
☐ Supplemental  
☐ Divisional  
☐ Continuation  
☐ C-I-P

**INVENTORSHIP IDENTIFICATION**

My residence, post office address and citizenship are as stated below, next to my name. I believe that I am the original, first and sole inventor of the subject matter that is claimed, and for which a patent is sought on the invention entitled:

**TITLE OF INVENTION**

BLACK HOLE FLIGHT SIMULATOR

**SPECIFICATION IDENTIFICATION**

- |                                     |  |
|-------------------------------------|--|
| <input checked="" type="checkbox"/> | The specification is attached hereto.  |
| <input type="checkbox"/>            | The specification was filed on August 4, 2003 as Application No. _____.                                |
| <input type="checkbox"/>            | The specification was described and claimed in PCT International Application No. _____ filed on _____. |

**ACKNOWLEDGMENT OF REVIEW OF PAPERS AND DUTY OF CANDOR**

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose information, which is material to patentability as defined in 37, Code of Federal Regulations, Section 1.56.

## POWER OF ATTORNEY

I hereby appoint the practitioners associated with the Customer Number provided below to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith:

**CUSTOMER NO. 24283**

---

**SEND CORRESPONDENCE TO:**  
**CUSTOMER NO. 24283**

**DIRECT TELEPHONE CALLS TO:**  
Name: Carl A. Forest  
Phone: 303-894-6114

---

## DECLARATION

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

## SIGNATURE(S)

Andrew J.S. Hamilton  
Inventor's signature



Date 02 Sep 2003

Country of Citizenship Britain

Residence Boulder, Colorado

Post Office Address 3500 19<sup>th</sup> Street, Boulder, CO 80304